

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER		400
TYPIST		6/10/97
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	5-19-97
2	6-19-97
3	0
4	0
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## SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Cancelled
- Restricted
- + Non-elected
- N Interference
- A Appeal
- O Objected

Claim	Date
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